A Publication of the National Wildfire Coordinating Group

#### NATIONAL INTERAGENCY INCIDENT MANAGEMENT SYSTEM

Sponsored by United States Department of Agriculture TASK BOOK FOR THE POSITION OF

United States
Department of the Interior

## **SUPERVISORY DISPATCHER (EDSP)**

National Association of State Foresters



PMS 311-57 NFES 2372

#### TASK BOOK ASSIGNED TO:

INDIVIDUAL'S NAME, DUTY STATION, AND PHONE NUMBER

#### TASK BOOK INITIATED BY:

OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER

LOCATION AND DATE THAT TASK BOOK WAS INITIATED

The material contained in this book accurately defines the performance expected of the position for which it was developed. This task book is approved for use as a position qualification document in accordance with the instructions contained herein.

# has met all requirements for qualification in this position and that such qualification has been issued. I verify that all tasks have been performed and are complete with signatures. I also verify that has performed as a trainee and should therefore be considered for certification in this position. EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER CERTIFYING OFFICIAL'S NAME, TITLE, DUTY STATION, AND PHONE NUMBER VERIFICATION / CERTIFICATION OF COMPLETED TASK BOOK CERTIFYING OFFICIAL'S SIGNATURE AND DATE FINAL EVALUATOR'S VERIFICATION **EVALUATOR'S SIGNATURE AND DATE** FOR THE POSITION OF AGENCY CERTIFICATION I certify that

Additional copies of this publication may be ordered from:

National Interagency Fire Center, ATTN: Supply 3833 S. Development Avenue Boise, Idaho 83705-5354

#### NATIONAL WILDFIRE COORDINATING GROUP POSITION TASK BOOK

Position Task Books (PTB) have been developed for designated positions within the National Interagency Incident Management System. Each PTB lists the performance requirements (tasks) for the specific position in a format that allows a trainee to be evaluated against written guidelines. Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the agency that the trainee be certified in that position.

Evaluation and confirmation of the individual's performance of all the tasks may involve more than one evaluator and can occur on incidents, in classroom simulation, and in other work situations. Designated PTBs require position performance during which the majority of required tasks are demonstrated on a single incident. Some positions also required that specific tasks be performed on a wildland fire—performance of these tasks on other types of incidents are NOT qualifying. It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated. All bullet statements within a task which require an action (contain an action verb) must be demonstrated before that task can be signed off.

A more detailed description of this process, definitions of terms, and responsibilities are included in the Wildland Fire Qualification Subsystem Guide 310-1. A brief list of responsibilities also appears below.

#### **RESPONSIBILITIES:**

- 1. The **Local Office** is responsible for:
  - Selecting trainees based on the needs of the local office and the geographic area.
  - Ensuring that the trainee meets the training and experience requirements included in the Wildland Fire Qualification Subsystem Guide 310-1.
  - Issuing PTBs to document task performance.
  - Explaining to the trainee the purpose and processes of the PTB as well as the trainee's responsibilities.
  - Providing opportunities for evaluation and/or making the trainee available for evaluation.
  - Providing an evaluator for local assignments.
  - Tracking progress of the trainee.
  - Confirming PTB completion.
  - Determining certification per local policy.
  - Issuing proof of certification.
- 2. The **individual** is responsible for:
  - Reviewing and understanding instructions in the PTB.
  - Identifying desired objectives/goals.

- Providing background information to an evaluator.
- Satisfactorily demonstrating completion of all tasks for an assigned position within three years.
- Assuring the Evaluation Record is complete.
- Notifying local office personnel when the PTB is completed and providing a copy.
- Keeping the original PTB in personal records.

### 3. The **Evaluator** is responsible for:

- Being qualified and proficient in the position being evaluated.
- Meeting with the trainee and determining past experience, current qualifications, and desired objectives/goals.
- Reviewing tasks with the trainee.
- Explaining to the trainee the evaluation procedures that will be utilized and which objectives may be attained.
- Identifying tasks to be performed during the evaluation period.
- Accurately evaluating and recording demonstrated performance of tasks. Satisfactory performance shall be documented by dating and initialing completion of the task. Unsatisfactory performance shall be documented in the Evaluation Record.
- Completing the Evaluation Record found at the end of each PTB.
- Signing the verification statement inside the front cover of the PTB when all tasks have been initialed.

#### 4. The **Training Specialist** is responsible for:

- Identifying incident evaluation opportunities.
- Identifying and assigning an evaluator that can provide a positive experience for the trainee, and make an accurate and honest appraisal of the trainee's performance.
- Providing PTBs to approved trainees on the incident when local agency was unable to provide them.
- Documenting the assignment.
- Conducting progress reviews.
- Conducting a close-out interview with the trainee and evaluator and assuring that documentation is proper and complete.

### QUALIFICATION RECORD

POSITION: SUPERVISORY DISPATCHER (EDSP)

TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ol> <li>MOBILIZATION</li> <li>Obtain complete information from dispatch upon initial activation:         <ul> <li>Incident order number.</li> <li>Request number.</li> <li>Incident name.</li> <li>Reporting location and time.</li> <li>Phone contacts.</li> <li>Transportation arrangements.</li> <li>Check-in location.</li> </ul> </li> </ol>	O		

O = task can be completed in any situation (classroom, simulation, prescribed fire, daily job, etc.)
I = task must be performed on an incident (flood, fire, search & rescue, etc.)
W = task must be performed on a wildfire incident \*Code:

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
INCIDENT ACTIVITIES  2. Upon arrival, check in, seek out supervisor or agency dispatcher for initial briefing. Gather available information necessary to immediately assess situation, determine priorities and take action as appropriate.  • Incident characteristics: single, multiple, type, etc.  • Current resource commitments.  • Current situation status.  • Expected duration.  • Weather (current and expected).  • Existing organizational structure.  • Weather (current and expected).  • Existing organizational structure.	D	RECORD #	upon completion
<ul> <li>Expectation of management.</li> <li>Delegated authorities.</li> <li>Local protocols.</li> <li>Emergency procedures.</li> <li>Identify any political, social, economic concerns which may affect operations.</li> <li>Other significant action occurring nationally or within area.</li> <li>Critical resources.</li> <li>Status of orders.</li> <li>Housing and transportation opportunities for dispatchers.</li> <li>Existing shift schedules.</li> <li>Final package requirements.</li> <li>Name of immediate supervisor.</li> <li>What is management interface (MAC).</li> <li>Team interactions (protocols to follow, briefings, etc.).</li> </ul>			

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	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
3.	<ul> <li>Develop an effective organization to meet present and future needs.</li> <li>Evaluates existing and considers potential workload.</li> <li>Orders or releases personnel in a timely manner to maintain a cost effective organization.</li> <li>Coordinates with local agency dispatcher to maximize opportunities for training assignments.</li> <li>Monitors expanded dispatch performance.</li> </ul>	I		
<ul> <li>4. Evaluate needs and orders supplies and materials.</li> <li>• Ensures adequate telephones, computers, fax, forms, etc. are provided.</li> </ul>		0		

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	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
ne	<ul> <li>necessary to all functional areas in the expanded dispatch organization.</li> <li>Facilitates the orderly, safe and effective mobilization and demobilization of resources.</li> <li>Establishes and directs priorities for flow of resource orders and intelligence information.</li> <li>Identifies and evaluates stressful situations or problem areas and makes adjustments to correct the situation.</li> <li>Ensures compliance with established dispatch protocols.</li> <li>Provides training for subordinates as necessary.</li> <li>Operations conducted considering local, area and national guidelines.</li> <li>Schedules and conducts briefings with support dispatchers and supervisory dispatcher to ensure complete information exchange.</li> </ul>			
	Prompt processing of resource orders. Documentation complete and legible. Communications open and effective. Team work emphasized.	I		

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	TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
7.	<ul> <li>Direct implementation of authorized offsite emergency procedures.</li> <li>Aircraft.</li> <li>Search and Rescue.</li> <li>Hazardous materials.</li> <li>Personnel.</li> </ul>	О		
8.	Conduct operations with consideration for political, social, economic, cultural concerns.  Community needs. EEO/Civil rights. Other concerns.	I		
9.	Ensure effective interface of information between management and expanded dispatch.  • Advises management, identifies alternatives, makes recommendations. • Implements management direction.	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>10. Direct the processing of intelligence information.</li> <li>Reviews ICS 209 for accuracy.</li> <li>Helps develop analysis.</li> <li>Helps develop prognosis.</li> <li>Identifies critical resource needs.</li> <li>Recommends priorities.</li> <li>Ensures communication of intelligence information.</li> <li>Manages interaction between outside entities and intelligence function (public affairs, IIO)</li> </ul>	О		
<ul> <li>11. Manage shift length and schedules.</li> <li>Considers personnel welfare.</li> <li>Provides adequate coverage.</li> <li>Recognizes personality characteristics.</li> <li>Food and lodging.</li> </ul>	I		
<ul> <li>12. <u>Use guides, reference materials and plans effectively.</u></li> <li>Mob guides.</li> <li>Contracts, etc.</li> </ul>	0		
<ul> <li>13. Complete performance evaluations for subordinates.</li> <li>Completes objectively and forwards to home units.</li> <li>Counsels as appropriate.</li> <li>Task books reviewed.</li> </ul>	I		

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TASK	C O D E*	EVALUATION RECORD #	EVALUATOR: Initial & date upon completion of task
<ul> <li>DEMOBILIZATION</li> <li>14. Accomplish disposition of records from expanded dispatch.</li> <li>Closes resource orders.</li> <li>Participates in close out meeting with local dispatchers.</li> </ul>	О		

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#### INSTRUCTIONS for EVALUATION RECORD

There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents, by simulation in classroom, or in daily duties, depending on what the position task book indicates. This should be sufficient for qualification in the position if the individual is adequately prepared. If additional blocks are needed, a page can be copied from a blank task book and attached.

**Evaluator's name, incident/office title & agency:** List the name of the evaluator, his/her incident position (on incidents) or office title, and agency.

Evaluator's home unit address & phone: self explanatory

#: The number in the upper left corner of the experience block identifies a particular experience or group of experiences. This number should be placed in the column labeled "Evaluation Record #" on the Qualification Record in order to indicate the circumstances under which a particular task was performed.

**Location of Incident/Simulation:** Identify the location where the tasks were performed by agency and office.

**Incident Type:** Enter type of incident, e.g., wildfire, search and rescue, flood, etc.

**Number and Type of Resources:** Enter the number of resources and types assigned to the incident pertinent to the trainee's task book position.

**Duration:** Enter inclusive dates during which the individual was evaluated. This block may indicate a span of time covering several small and similar incidents if the individual has been evaluated on that basis, i.e., several initial attack fires in similar fuel types.

Mgt. Level: Indicate ICS organization level, i.e., Type 4, Type 3, Type 2, Type 1 or Area Command.

**NFFL Fuel Model:** For wildfire experience, enter number (1-13) of the fuel model in which the incident occurred and under which the individual was evaluated.

- 1. Short Grass (1 foot)
- 2. Timber (grass & understory)
- 3. Tall grass (2 1/2 feet)
- 4. Chaparral (6 feet)
- 5. Brush (2 feet)
- 6. Dormant brush-Hardwood Slash
- 7. Southern Rough

- 8. Closed Timber Litter
- 9. Hardwood Litter
- 10. Timber (litter understory)
- 11. Light Logging Slash
- 12. Medium Logging Slash
- 13. Heavy Logging Slash

**Recommendation:** Check as appropriate and/or make comments regarding the future needs for development of this trainee.

**Date:** List the date the record is being completed.

**Evaluator's initials:** Initial here to authenticate your recommendations and to allow for comparison with initials in the Qualifications Record.

**Evaluator's relevant red card rating:** List <u>your</u> certification relevant to the trainee position you supervised.

### **Evaluation Record**

TRAINEE NAME TRAINEE PO			POSITION			
#1	Evaluator's incident/of	s name, fice title & agency:				
Evaluator	's home unit	address & phone:				
or Sin	of Incident nulation y & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
mandator Recomme	The tasks initialed & dated by me have been performed under my supervision and in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee:  The individual has successfully performed all tasks for the position and should be considered for certification.  The individual was not able to complete certain tasks (comments below) or additional guidance is required.  Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory & suggested) prior to further assignment as a trainee.  Recommendations:  Evaluator's initials: Evaluator's relevant red card (or agency certification) rating: Evaluator's relevant red card (or agency certification) rating:					
#2	Evaluator's					
!		fice title & agency: address & phone:				
Location or Sin	of Incident nulation y & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
trainee. I	recommend The indiv The indiv Not all tas The indiv y & suggeste	the following for further idual has successfully peridual was not able to consks were evaluated on the idual is severely deficiently prior to further assign	r development of this train erformed all tasks for the p implete certain tasks (common is assignment and an addi- nation to the performance of ta- ment as a trainee.	position and should be consinents below) or additional gational assignment is needed asks for the position and mu	idered for certification guidance is required. It to complete the eva	on. luation. ng (both
	on) rating:	Evaluator's in		Dvariation 5 felev	ant rea cara (or ager	,

# **Evaluation Record** (Continuation Sheet)

	TI	RAINEE NAME		TRAINEE	POSITION	
#3	Evaluator's incident/of	s name, fice title & agency:				
Evaluator		t address & phone:				
or Sin	of Incident nulation y & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
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		Evaluator's in	nitials:	Evaluator's relev	ant red card (or agen	ıcy
	<del></del>					
#4		fice title & agency:				
Evaluator	's home unit	address & phone:	i———i		·i	
or Sin	of Incident nulation y & area)	Incident Type (wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)	Mgt. Level (Area Command, Type 1, 2, 3, or 4)	NFFL Fuel Model
				to		
The tasks initialed & dated by me have been performed under my supervision and in a satisfactory manner by the above named trainee. I recommend the following for further development of this trainee:  The individual has successfully performed all tasks for the position and should be considered for certification.  The individual was not able to complete certain tasks (comments below) or additional guidance is required.  Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.  The individual is severely deficient in the performance of tasks for the position and must complete all training (both mandatory & suggested) prior to further assignment as a trainee.  Recommendations:						
Date: certification	on) rating:	Evaluator's in	nitials:	Evaluator's relev 	vant red card (or agen	ıcy